

<b>CLAIMS ONLY</b>							SERIAL NO.	FILING DATE
							APPLICANT(S)	
<b>CLAIMS</b>								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*
	IND.	DEP.	IND.	DEP.	IND.	DEP.		*
1	/	/					51	
2		/					52	
3		/					53	
4		/					54	
5		/					55	
6		/					56	
7	/	/					57	
8		/					58	
9		/					59	
10	/						60	
11	/						61	
12							62	
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42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.	4	↓		↓		↓	TOTAL IND.	↓
TOTAL DEP.	7	←		←		←	TOTAL DEP.	←
TOTAL CLAIMS	11						TOTAL CLAIMS	

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-2022 (1-98)

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